

Employability Fund EF provider fact sheet

An EF Provider fact sheet must be completed by the EF Provider for all contracted EF provision in each Local Employability Partnership (LEP) Area in line with their contract allocation. A separate fact sheet must be completed for each Stage offered by the EF Provider. The EF Provider must submit the completed fact sheets to their SDS Skills Investment Adviser for approval no later than 7 days after written acceptance of the contract. Once approved the EF Provider must promptly circulate to all EF referring organisations in the LEP area.

EF provider name

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Title of EF Provision

.....

Local Employability Partnership (LEP) Area

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EF Stage *(Tick appropriate stage. Please note that a separate fact sheet is required for each stage)*

Stage 2 Stage 3 Stage 4

Number of EF places available *(Insert number of contracted places for the selected stage)*

Age 16-17 Age 18+

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Local provider contact details *(This should be the local contact for the day to day enquiries from EF referring organisations in the LEP area)*

Address and postcode

EF provider contact name

tel no.

email

Website (if applicable)

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Location of EF provision *(If different from above. If multiple locations are used please detail e.g. 4 weeks in training centre and 2 weeks work placement)*

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Days and hours per week and anticipated duration of EF provision *(Number of hours, days and mode of attendance indicating start and finish times, length of the course and whether it is continuous or flexible e.g. 6 weeks continuous or 8-12 weeks depending on progress. Please note this must not exceed the maximum length of stay outlined in the EF rules)*

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Start dates *(Including number of places for each start date or timescales if a rolling programme)*

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Referral arrangements and requirements *(How EF provider wishes to be notified by referring organisation)*

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Aim of provision (e.g. "To prepare attendees for employment by providing underpinning knowledge of a particular sector and to provide the basic skills for that sector")

Content of EF provision (Please include as much detail as possible e.g. pre recruitment training for a specific sector, job focussed training, employability provision, core skills, summary of support for personal development and info on work experience element)

Certification (Detail all certificates that are available as part of the EF provision and the organisation that is accredited to deliver the certificate. If EF provision contains units/modules at different SCQF levels, the overall level should equate to the majority of provision (50%+)

Name/Code (if appropriate) of Unit/Module/SCQF rate qualification (where the qualification is not SCQF credit rates please include a brief description)	Organisation accredited to deliver the certificate	SCQF level	SCQF credit points
		Overall level	Total credit points

Proposed outcomes and potential progression routes on successful completion (Detail linkages to other local opportunities and progression towards FE, MA, employment)

Additional information (Any extra information or notes regarding the EF provision e.g. application and administration requirements, minimum number of referrals required)

EF Provider Declaration

I ensure that the information in this EF fact sheet is accurate and supported by a SDS contract for the EF. I have written approval from an SDS Skills Investment Adviser on the content of this EF fact sheet. I agree to make this fact sheet available to all EF referring organisations in the relevant LEP area.

Name..... Date.....